## **New Hampshire Insurance Department**

Advisory Committee on Behavioral Health and Addiction Services
November 14, 2017 meeting, 9:30-11:05 a.m.
Room 100, Walker Building, Concord, NH

**Board Members in Attendance:** Representative Ed Butler, Senator Dan Feltes (via phone), Andrea Rancatore, Dr. Richard LaFleur, Ken Norton, Dr. Paul Frehner, Abby Shockley, Dr. Peter Mason, Dr. William Brewster, Dr. Robert Feder, Stephanie Savard and Michele Merritt.

**Board Members Unable to Attend:** Marty Boldin, Senator Jeb Bradley, Representative John Hunt, Amelie Gooding, Christopher Kozak, Stephen Kozak, Courtney Gray, Lucy Hodder and Joseph Plaia.

Commissioner welcomed the group at 9:35 a.m. and asked if anyone had any comments about the previous meeting's notes. Hearing no comments or questions, the meeting continued. He explained to the group that they would be hearing from Jenny Patterson about the federal consumer protection grant which the Fiscal Committee voted in favor to accept. The vote was unanimous and this will help defray costs to carriers associated with the parity market conduct examination and fund related parity enforcement projects. The Commissioner thanked the Advisory Committee for their support.

## **NHID Updates:**

Jenny Patterson explained to the group that the Department would be undertaking various projects under the grant, such as a provider complaints database; analysis of CHIS data in respect to Behavioral Health and the parity market conduct examinations. Maureen Belanger provided an explanation of the market conduct examination to the group. Abby Shockley asked if this exam was broadening the scope from the previous exam to include all of behavioral health services. Belanger confirmed that it would look at the full spectrum of behavioral health care. Ken Norton asked if this exam was for commercial carriers only. Patterson responded that the exams look at fully-insured coverage only. U.S. DOL oversees self-insured plans and the exam does not look at Managed Care Organizations. Shockley added that the DHHS has an internal parity team that ensures requirements are being met. The DHHS point person for parity, Lorene Regan, has moved on and they are in the process of determining a new team lead.

Patterson explained that the standard MOU for insurance regulators to coordinate with the U.S. Department of Labor has been finalized within the NAIC and that the NHID should be able to enter into the MOU by the end of the year.

Shockley asked about corrective action for the previous market conduct exams. Belanger confirmed that the corrective action plans have all be met. Michelle Merritt asked about the period of time the exams will cover. Patterson responded that the warrants that define the scope have not been issued yet but that the Department plans to look at the 2016 timeframe. Dr. Frehner asked about the format for providers to file complaints with the Consumer Services unit. Shockley recommended that the NHID host a call for request of feedback from providers and advocates. Alex Feldvebel explained that a consultant is currently building forms that will improve the process for Consumer Services to take complaints from providers.

The Commissioner provided an update about the PAP Commission. The Commission decided to recommend the program should be reauthorized with coverage provided by MCOs rather than private plans (QHPs) because it would be significantly more cost effective. Also the private insurance coverage in the current program makes it very complicated to recapture savings through a 1332 waiver. Patterson added that the Commission will meet once more to adopt a report.

Maureen Kerrigan from the Centers for Medicaid and Medicare Services shared that CMS has a system to track complaints but many senior citizens are very hesitant to complain.

Tyler Brannen spoke briefly about the recent annual hearing on cost drivers for health insurance. He added that the Department is continuing its work on the network adequacy rule, with a renewed emphasis on behavioral health and substance use disorder treatment access. The new rule, which needs to go through the formal rulemaking process, would be effective July 2018.

## **Member Updates:**

The committee discussed emergency room boarding and the Medicare population. Kerrigan (CMS) explained that the SHIP program assists people with Medicare enrollment and that they could be invited to the meeting to have a discussion about a creative solution for the Medicare individuals on the emergency room boarding wait list for inpatient treatment. They enroll people in Medicare and can also help resolve issues. The ER wait list is down to 29. After open enrollment CMS can assist in inviting a SHIP representative to a meeting.

Shockley brought up an issue about a provider having concerns regarding confidentiality when insurance companies request patient records. She queried whether guidance should be given in the field so that SUD medical records meet the required disclosure.

Stephanie Savard brought up a credentialing issue and asked if they would be part of the market conduct examinations. She has a hired provider who started working in June but is still only paneled for 1 of 4 insurance companies. Savard agreed to work with Dr. Brewster on a case study.

Patterson reviewed some of the topics for the next meeting. NHID will give updates on the market conduct exam, provider education on sharing complaints with the NHID, and outreach on parity. The NHID reminded everyone to contact Eireann if they have outreach opportunities.

The next meeting is January 17 at 1:30-3:30 in Room 100. Meeting was adjourned at 11:05 a.m.